

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Planned Parenthood Votes

ADDRESS (number and street)

434 West 33rd Street

☐ Check if different than previously reported. (ACC)

New York

NY

10001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00489799

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Aaron Samulcek

Signature of Treasurer

Aaron Samulcek

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period: From: M M / D D / Y Y Y Y 09 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y 2014		367024.11
(b) Cash on Hand at Beginning of Reporting Period.....	1720400.28	
(c) Total Receipts (from Line 19)	2075243.23	4783425.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3795643.51	5150449.58
7. Total Disbursements (from Line 31)	2327169.56	3681975.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1468473.95	1468473.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	975582.70	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Planned Parenthood Votes

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
09		01		2014

To:

M M	/	D D	/	Y Y Y Y
09		30		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

2073864.23

4773500.15

(ii) Unitemized

150.00

1696.32

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

2074014.23

4775196.47

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

2000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

2074014.23

4777196.47

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

1229.00

6229.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

2075243.23

4783425.47

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

2075243.23

4783425.47

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	714150.00	1113847.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	714150.00	1113847.38
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	1326921.74	1558988.08
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5146.32
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5146.32
29. Other Disbursements	286097.82	1003993.85
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2327169.56	3681975.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2327169.56	3681975.63

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2074014.23	4777196.47
34. Total Contribution Refunds (from Line 28(d))	0.00	5146.32
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2074014.23	4772050.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	714150.00	1113847.38
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	714150.00	1113847.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Ms. Nancy Beeuwkes

Mailing Address 1360 Monument Street

City State Zip Code
 Concord MA 01742

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Home maker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 24 2014

Transaction ID : A2014-2297148

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael Bloomberg

Mailing Address 17 East 79th Street

City State Zip Code
 New York NY 10075

FEC ID number of contributing
federal political committee.

C

Name of Employer

BLOOMBERG LP

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 22 2014

Transaction ID : A2014-2297149

Amount of Each Receipt this Period

1000000.00

Full Name (Last, First, Middle Initial)

C. Merle C Chambers

Mailing Address 44 Cook Street, Suite 200

City State Zip Code
 Denver CO 80206

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 09 24 2014

Transaction ID : A2014-2297150

Amount of Each Receipt this Period

25000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1125000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Shelly D Chigier

Mailing Address 237 Summer Street

City

Manchester

State

MA

Zip Code

01944

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 18 / 2014

Transaction ID : A2014-2297151

Amount of Each Receipt this Period

12500.00

Full Name (Last, First, Middle Initial)

B. C Dean Debnam

Mailing Address 255 Penley Circle

City

Raleigh

State

NC

Zip Code

27609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Workplace Options

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 22 / 2014

Transaction ID : A2014-2297152

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Mr. Lee Fikes

Mailing Address 3901 Euclid Ave

City

Dallas

State

TX

Zip Code

75205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bonanza Oil Company

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A2014-2297153

Amount of Each Receipt this Period

33000.00

SUBTOTAL of Receipts This Page (optional)..... ►

50500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Susan C Kaplan

Mailing Address 2 Newton Executive Park #300

City State Zip Code
 Newton MA 02462

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Kaplan Financial Services

Occupation
 Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

09 / 08 / 2014

Transaction ID : A2014-2297154

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Jill Lafer

Mailing Address 1060 Fifth Avenue #7B

City State Zip Code
 New York NY 10128-0104

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Hoffman-Lafer Associates

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

09 / 23 / 2014

Transaction ID : A2014-2297155

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Barbara F Lee

Mailing Address 131 Mt. Auburn Street Ste 2

City State Zip Code
 Cambridge MA 02138

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Barbara Lee Foundation

Occupation
 Founder/Philanthropist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

160000.00

Date of Receipt

09 / 02 / 2014

Transaction ID : A2014-2297156

Amount of Each Receipt this Period

160000.00

SUBTOTAL of Receipts This Page (optional)..... ►

190000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Elaine F Marshall

Mailing Address 3920 City of Oaks Wynd

City
Raleigh

State
NC

Zip Code
27612

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of North Carolina

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 18 / 2014

Transaction ID : A2014-2297157

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Noah McCormack

Mailing Address 709 Buchanan Street

City

San Francisco

State

CA

Zip Code

94102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self - Employed

Occupation

Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

09 / 20 / 2014

Transaction ID : A2014-2297158

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. Marie McKellar

Mailing Address PO Box 149

City

Dobbs Ferry

State

NY

Zip Code

10522

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

09 / 23 / 2014

Transaction ID : A2014-2297159

Amount of Each Receipt this Period

20000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Leigh Merinoff

Mailing Address 317 Massachusetts Avenue

City State Zip Code
Haworth NJ 07641

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2014

Transaction ID : A2014-2297160

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael A Newton

Mailing Address 2830 NW Xavier Street

City State Zip Code
Portland OR 97210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nike, Inc.

Occupation

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 24 / 2014

Transaction ID : A2014-2297161

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Susan Newton

Mailing Address 50 Central Park W, #5C

City State Zip Code
New York NY 10023-6006

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 25 / 2014

Transaction ID : A2014-2297163

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Ms. Paula O'Brien

Mailing Address 463 Camino Manzano

City

Santa Fe

State

NM

Zip Code

87505-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

09 / 26 / 2014

Transaction ID : A2014-2297164

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Planned Parenthood Action Fund

Occupation

N/A

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

37683.99

Date of Receipt

09 / 11 / 2014

Transaction ID : A2014-2320408

Amount of Each Receipt this Period

334.24

In-kind contribution: Value of email list used for 9/11 independent expenditures. See Schedule E

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Planned Parenthood Action Fund

Occupation

N/A

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

47213.98

Date of Receipt

09 / 30 / 2014

Transaction ID : A2014-2310704

Amount of Each Receipt this Period

9529.99

In-kind contribution: staff time for accounting and FEC compliance

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

109864.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Ms. Carrie Rhodes

Mailing Address 5600 NE Windermere Road

City State Zip Code
 Seattle WA 98105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self - Employed

Breeder

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

MM / DD / YYYY
 09 / 04 / 2014

Transaction ID : A2014-2297165

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Ms. Deborah Stein Sharpe

Mailing Address 15 Historical Way

City State Zip Code
 Canton MA 02021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Steinsharpe LLC

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

MM / DD / YYYY
 09 / 29 / 2014

Transaction ID : A2014-2297166

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

C. George Soros

Mailing Address 1060 Fifth Avenue #78-A

City State Zip Code
 New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Soros Fund Management

Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

MM / DD / YYYY
 09 / 12 / 2014

Transaction ID : A2014-2297167

Amount of Each Receipt this Period

500000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

530000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Laurie Tisch

Mailing Address 156 W 56th Street #2001

City State Zip Code
New York NY 10019

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2014

Transaction ID : A2014-2297168

Amount of Each Receipt this Period

25000.00

Full Name (Last, First, Middle Initial)

B. Urvashi M Vaid

Mailing Address 230 West End Avenue, Apt. #10C

City State Zip Code
New York NY 10023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbia Law School

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 23 / 2014

Transaction ID : A2014-2297169

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Teresa Vanduyn

Mailing Address 27 Bushee Road

City State Zip Code
Asheville NC 28803

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 18 / 2014

Transaction ID : A2014-2297170

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

26500.00

2073864.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Mailing Address 434 West 33rd Street

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1229.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : A2014-13664

Amount of Each Receipt this Period

1229.00

Reimbursement for 8/20 payment made in error to
Premiere Global Services

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1229.00

1229.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Votes Northwest

Mailing Address 2001 East Madison Street

City State Zip Code
Seattle WA 98122

Purpose of Disbursement
Advance payment for Independent Expenditure activity

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 22 2014
Transaction ID : B536760

Amount of Each Disbursement this Period

13500.00

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address P.O. Box 53852

City State Zip Code
Phoenix AZ 85072

Purpose of Disbursement
Credit card fee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 05 2014
Transaction ID : B536464

Amount of Each Disbursement this Period

2559.00

Full Name (Last, First, Middle Initial)

C. Stone's Phones, Inc.

Mailing Address 41-750 Rancho Las Palmas Dr #E-3

City State Zip Code
Rancho Mirage CA 92270

Purpose of Disbursement
Phone survey

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 11 2014
Transaction ID : B536467

Amount of Each Disbursement this Period

88878.20

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104937.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
In-kind: Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2014

Transaction ID : B511024

Amount of Each Disbursement this Period

-5647.75

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

B. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
In-kind: Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2014

Transaction ID : B511026

Amount of Each Disbursement this Period

-22591.00

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

C. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
In-kind: Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2014

Transaction ID : B511027

Amount of Each Disbursement this Period

-22591.03

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-50829.78

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement	<div>001</div> Category/ Type
In-kind: Independent Expenditure for Hagan. See Schedule E	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		01		2014

Transaction ID : B511028

Amount of Each Disbursement this Period

-5647.75

Draw down on advance to COG reported on line 21b of the 2014 FEC August Monthly report

Full Name (Last, First, Middle Initial)

B. Beehive Research

Mailing Address 617 Pickford Place NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement	<div>001</div> Category/ Type
Operating expense - research	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : B536673

Amount of Each Disbursement this Period

2314.30

Full Name (Last, First, Middle Initial)

C. Waterfront Strategies

Mailing Address 3050 K Street Suite 100

City	State	Zip Code
Washington	DC	20007

Purpose of Disbursement	<div>001</div> Category/ Type
Payment for October Independent Expenditure activity	

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2014

Transaction ID : B536465

Amount of Each Disbursement this Period

493715.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

490381.55

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
In-kind: Independent Expenditure for Begich. See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : B536632

Amount of Each Disbursement this Period

-105456.42

Draw down on advance to COG reported on line 21b of the 2014 FEC September Monthly report

Full Name (Last, First, Middle Initial)

B. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
In-kind: Independent Expenditure for Sullivan. See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : B536635

Amount of Each Disbursement this Period

-93056.42

Draw down on advance to COG reported on line 21b of the 2014 FEC September Monthly report

Full Name (Last, First, Middle Initial)

C. Analyst Institute LLC

Mailing Address 815 16th Street, NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Operating expense - research

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2014

Transaction ID : B536470

Amount of Each Disbursement this Period

7000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-191512.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 70

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. 76 Words

Mailing Address 1806 Vernon St, NW #100

City Washington State DC Zip Code 20009

Purpose of Disbursement
Fundraising expense - Donor presentation

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 19 / 2014
Transaction ID : B536461

Amount of Each Disbursement this Period

482.07

Full Name (Last, First, Middle Initial)

B. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Additional payment for 9/12 Sullivan IE. See Schedule E.

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014
Transaction ID : B536638

Amount of Each Disbursement this Period

12400.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Advance payment for independent expenditures

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014
Transaction ID : B536643

Amount of Each Disbursement this Period

105923.06

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

106405.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Community Outreach Group LLC

Mailing Address 1110 Vermont Ave N.W. #300

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Advance payment for independent expenditures

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : B536644

Amount of Each Disbursement this Period

229906.05

Full Name (Last, First, Middle Initial)

B. SWAY

Mailing Address 4311 Leland Street

City	State	Zip Code
Chevy Chase	MD	20815

Purpose of Disbursement
Advance payment for Independent Expenditures

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2014

Transaction ID : B536681

Amount of Each Disbursement this Period

25000.00

Full Name (Last, First, Middle Initial)

C. SWAY

Mailing Address 4311 Leland Street

City	State	Zip Code
Chevy Chase	MD	20815

Purpose of Disbursement
Partial payment for 9/15 Independent Expenditure opposing Ernst. See
Schedule F

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2014

Transaction ID : B536759

Amount of Each Disbursement this Period

12504.48

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

267410.53

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
In-kind: Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2014
Transaction ID : B511014

Amount of Each Disbursement this Period

-1325.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
In-kind: Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2014
Transaction ID : B511015

Amount of Each Disbursement this Period

-5300.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Health Systems Action Fund

Mailing Address 100 South Boylan Ave.

City Raleigh State NC Zip Code 27603

Purpose of Disbursement
In-kind: Independent Expenditure for Hagan. See Schedule E

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 01 / 2014
Transaction ID : B511016

Amount of Each Disbursement this Period

-5300.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-11925.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 70

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Health Systems Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	01	/	2014

Mailing Address 100 South Boylan Ave.

City	State	Zip Code
Raleigh	NC	27603

 Purpose of Disbursement
 In-kind: Independent Expenditure for Hagan. See Schedule E

001

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Transaction ID : B511017

Amount of Each Disbursement this Period

-1325.00

Draw down on advance to PPHS-AF reported on line 21b of the 2014 FEC July Monthly report

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	02	/	2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

 Purpose of Disbursement
 In-kind contribution of predictive dialer minutes to PP TX Votes PAC (non-federal TX PAC)

001

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Transaction ID : B536713

Amount of Each Disbursement this Period

-5500.00

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	06	/	2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

 Purpose of Disbursement
 In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

001

Candidate Name

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Not Applicable

Transaction ID : B536716

Amount of Each Disbursement this Period

-450.28

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-7275.28

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of L Van de Putte, Lt Gov
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 06 2014
Transaction ID : B536719

Amount of Each Disbursement this Period

-385.32

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of Leigh Bailey, TX State House
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 06 2014
Transaction ID : B536728

Amount of Each Disbursement this Period

-217.56

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal
TX PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 06 2014
Transaction ID : B536730

Amount of Each Disbursement this Period

-6412.63

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-7015.51

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 06 2014
Transaction ID : B532437

Amount of Each Disbursement this Period

-1810.81

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC (non-federal PA PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 09 2014
Transaction ID : B532439

Amount of Each Disbursement this Period

-1195.19

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
New York NY 10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)
Candidate Name

001

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 12 2014
Transaction ID : B536732

Amount of Each Disbursement this Period

-238.46

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-3244.46

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC
 (non-federal PA PAC)
 Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
 09 / 14 / 2014

Transaction ID : B532441

Amount of Each Disbursement this Period

-174.90

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contrib. of website and social media advocacy tools for Wendy Davis,
 Gov candidate in TX
 Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
 09 / 16 / 2014

Transaction ID : B536734

Amount of Each Disbursement this Period

-3826.58

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City State Zip Code
 New York NY 10001

Purpose of Disbursement
 In-kind contrib. of website and social media advocacy tools for Tom Wolf, Gov
 candidate in PA
 Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
 09 / 16 / 2014

Transaction ID : B536736

Amount of Each Disbursement this Period

-886.09

Draw down on advance to Action Fund reported on Line 21b of the June monthly report. See line 29

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

-4887.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
Staff time for fundraising. See Schedule D

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Transaction ID : B536746

Amount of Each Disbursement this Period

12031.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
Payment for debt originally reported on Sep Monthly Rpt. See Schedule D

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Transaction ID : B532110

Amount of Each Disbursement this Period

11727.28

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution: staff time for accounting and FEC compliance

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Transaction ID : B536656

Amount of Each Disbursement this Period

9529.99

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

21257.27

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blackbaud Inc.

Mailing Address 2000 Daniel Island Drive

City	State	Zip Code
Charleston	SC	29492

Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : B536455

Amount of Each Disbursement this Period

403.47

Full Name (Last, First, Middle Initial)

B. Bank of America

Mailing Address P.O. Box 27025

City	State	Zip Code
Richmond	VA	23261

Purpose of Disbursement
Merchant fees

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2014

Transaction ID : B536463

Amount of Each Disbursement this Period

45.29

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ►

448.76

TOTAL This Period (last page this line number only)..... ►

714150.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Voters of Iowa PAC

Mailing Address 1171 7th St

City	State	Zip Code
Des Moines	IA	50322

Purpose of Disbursement
Contribution to non-federal IA PAC

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☐ Primary
☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

Transaction ID : B536655

Amount of Each Disbursement this Period

50000.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)

Candidate Name

PP Pennsylvania PACOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☐ Primary
☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2014

Transaction ID : B532436

Amount of Each Disbursement this Period

1810.81

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC (non-federal PA PAC)

Candidate Name

PP Pennsylvania PACOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

☐ Primary
☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2014

Transaction ID : B532438

Amount of Each Disbursement this Period

1195.19

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53006.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contrib. of staff travel expenses in support of PP Pennsylvania PAC
(non-federal PA PAC)

Candidate Name

PP Pennsylvania PACOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2014

Transaction ID : B532440

Amount of Each Disbursement this Period

174.90

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contrib. of website and social media advocacy tools for Tom Wolf, Gov
candidate in PA

Candidate Name

Tom WolfOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2014

Transaction ID : B536737

Amount of Each Disbursement this Period

2940.49

[MEMO ITEM]

See schedule D

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contrib. of website and social media advocacy tools for Tom Wolf, Gov
candidate in PA

Candidate Name

Tom WolfOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2014

Transaction ID : B536735

Amount of Each Disbursement this Period

886.09

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1060.99

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of staff time in support of PP Pennsylvania PAC (non-federal PA PAC)	<div>011</div> Category/ Type
Candidate Name PP Pennsylvania PAC	

Office Sought:	House <input type="checkbox"/>
	Senate <input type="checkbox"/>
	President <input type="checkbox"/>

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : B536738

Amount of Each Disbursement this Period

1320.73

[MEMO ITEM]
See schedule D

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Pennsylvania PAC

Mailing Address 1514 N 2nd Street

City	State	Zip Code
Harrisburg	PA	17102

Purpose of Disbursement Contribution to non-federal PA PAC	<div>011</div> Category/ Type
Candidate Name	

Office Sought:	House <input type="checkbox"/>
	Senate <input type="checkbox"/>
	President <input type="checkbox"/>

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2014

Transaction ID : B536628

Amount of Each Disbursement this Period

200000.00

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement In-kind contribution of predictive dialer minutes to PP TX Votes PAC (non-federal TX PAC)	<div>011</div> Category/ Type
Candidate Name PP TX Votes PAC	

Office Sought:	House <input type="checkbox"/>
	Senate <input type="checkbox"/>
	President <input type="checkbox"/>

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : B536712

Amount of Each Disbursement this Period

5500.00

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

205500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Beehive Research

Mailing Address 617 Pickford Place NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement	011 Category/ Type
Payment for February in-kind contribution of research for Wendy Davis, Gov Candidate in TX	

Candidate Name
Wendy Davis

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼
<input type="checkbox"/> President	

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : B536462

Amount of Each Disbursement this Period

1800.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011 Category/ Type
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)	

Candidate Name
PP TX Votes PAC

Office Sought:	Disbursement For: 2014
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Other (specify) ▼
<input type="checkbox"/> President	Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2014

Transaction ID : B536729

Amount of Each Disbursement this Period

6412.63

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011 Category/ Type
In-kind contribution of staff time in support of Leigh Bailey, TX State House Candidate	

Candidate Name
Leigh Bailey

Office Sought:	Disbursement For: 2014
<input checked="" type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼
<input type="checkbox"/> President	

State: TX District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		06		2014

Transaction ID : B536727

Amount of Each Disbursement this Period

217.56

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8430.19

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 70

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX

Candidate Name

Wendy DavisOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	06	/	2014

Transaction ID : B536715

Amount of Each Disbursement this Period

450.28

See line 21b

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff time in support of L Van de Putte, Lt Gov candidate in TX

Candidate Name

Leticia Van de PutteOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	06	/	2014

Transaction ID : B536718

Amount of Each Disbursement this Period

385.32

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement
In-kind contribution of staff travel expenses in support of PP TX Votes PAC (non-federal TX PAC)

Candidate Name

PP TX Votes PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼ Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	12	/	2014

Transaction ID : B536731

Amount of Each Disbursement this Period

238.46

See line 21b

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1074.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 70

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Blueprint Interactive

Mailing Address 2229 North Pollard St

City	State	Zip Code
Arlington	VA	22207

Purpose of Disbursement	011
Payment for debt previously reported on August monthly report. See Schedule D	

Candidate Name

Wendy Davis

Office Sought:	House
	Senate
	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

Transaction ID : B509617

Amount of Each Disbursement this Period

13200.00

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contrib. of website and social media advocacy tools for Wendy Davis, Gov. candidate in TX	

Candidate Name

Wendy Davis

Office Sought:	House
	Senate
	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2014

Transaction ID : B536733

Amount of Each Disbursement this Period

3826.58

See line 21b

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contribution of staff time in support of PP TX Votes PAC (non-federal TX PAC)	

Candidate Name

PP TX Votes PAC

Office Sought:	House
	Senate
	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : B536742

Amount of Each Disbursement this Period

8108.47

[MEMO ITEM]
See schedule D**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17026.58

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 70

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contribution of staff time in support of Leigh Bailey, TX State House candidate	

Candidate Name

Leigh Bailey

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : B536741

Amount of Each Disbursement this Period

34.81

[MEMO ITEM]

See schedule D

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contribution of staff time in support of Wendy Davis, Gov candidate in TX	

Candidate Name

Wendy Davis

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : B536739

Amount of Each Disbursement this Period

1024.92

[MEMO ITEM]

See schedule D

Full Name (Last, First, Middle Initial)

C. Planned Parenthood Action Fund

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contribution of staff time in support of L Van de Putte, Lt Gov candidate in TX	

Candidate Name

Leticia Van de Putte

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : B536740

Amount of Each Disbursement this Period

701.97

[MEMO ITEM]

See schedule D

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 70

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

Full Name (Last, First, Middle Initial)

A. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contribution of list rental for fundraiser invite for PP TX Votes PAC (non-federal TX PAC)	

Candidate Name

PP TX Votes PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Not Applicable

Transaction ID : B536743

Amount of Each Disbursement this Period

12.16

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Planned Parenthood Action Fund

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Mailing Address 434 West 33rd Street

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement	011
In-kind contribution of list rental for fundraiser invite for PP TX Votes PAC (non-federal TX PAC)	

Candidate Name

PP TX Votes PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Not Applicable

Transaction ID : B536744

Amount of Each Disbursement this Period

4.61

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

286097.82

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 36 OF 70

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MackCrounse Group

Nature of Debt (Purpose):
Canvass literature

Mailing Address 2001 N. Beauregard St. Ste 420

City State

Alexandria

Zip Code

VA

22311

Outstanding Balance Beginning This Period

3950.00

Transaction ID : D439006

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3950.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Planned Parenthood Action Fund Inc.

Nature of Debt (Purpose):

Staff time for fundraising efforts and non-federal in-kind activity. See lines 21b, 29 & Schedule E

Mailing Address 434 West 33rd Street

City State

New York

Zip Code

NY

10001

Outstanding Balance Beginning This Period

16817.55

Transaction ID : D539006

Amount Incurred This Period

28408.30

Payment This Period

16817.55

Outstanding Balance at Close of This Period

28408.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FedEx

Nature of Debt (Purpose):

Shipping of invitations for fundraiser

Mailing Address 326 7th Avenue

City

New York

State

NY

Zip Code

10001

Outstanding Balance Beginning This Period

21.04

Transaction ID : D739009

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21.04

1) SUBTOTALS This Period This Page (optional)..... ►

32379.34

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 37 OF 70

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PPCNC Action Fund

Nature of Debt (Purpose):

Postage of invitations for fundraiser.

Mailing Address PO Box 9194

City State

Zip Code

Chapel Hill

NC

27515

Outstanding Balance Beginning This Period

200.00

Transaction ID : D739010

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

76 Words

Nature of Debt (Purpose):

Production of advertisement.

Mailing Address 1720 Eye Street NW, Ste 550

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

33509.00

Transaction ID : D739012

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33509.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Interactive

Nature of Debt (Purpose):

Online advertising. See line 29 and Schedule E

Mailing Address 2229 North Pollard St

City

State

Zip Code

Arlington

VA

22207

Outstanding Balance Beginning This Period

18210.00

Transaction ID : D739013

Amount Incurred This Period

0.00

Payment This Period

18210.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

33709.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 38 OF 70

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Work for Progress

Nature of Debt (Purpose):

Distribution of canvass literature. See
Schedule E

Mailing Address 1543 Wazee Street, 4th Floor

City State

Zip Code

Denver

CO

80202

Outstanding Balance Beginning This Period

24300.00

Transaction ID : D739014

Amount Incurred This Period

329775.30

Payment This Period

24300.00

Outstanding Balance at Close of This Period

329775.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Analyst Institute LLC

Nature of Debt (Purpose):

Testing of online ads. See Schedule E

Mailing Address 815 16th Street, NW

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D739015

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Feldman Group Inc.

Nature of Debt (Purpose):

Messaging research. See Schedule E

Mailing Address 508-510 8th St. SE

City

State

Zip Code

Washington

DC

20003

Outstanding Balance Beginning This Period

31000.00

Transaction ID : D739016

Amount Incurred This Period

0.00

Payment This Period

31000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

329775.30

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 39 OF 70

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Rising Tide Interactive

Nature of Debt (Purpose):

Online advertising. See Schedule E

Mailing Address 901 New York Ave NW #470 East

City State

Zip Code

Washington

DC

20001

Outstanding Balance Beginning This Period

14457.75

Transaction ID : D739017

Amount Incurred This Period

0.00

Payment This Period

14457.75

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Pivot Group

Nature of Debt (Purpose):

Printing of canvass literature

Mailing Address 1701 I Street NW Ste 550

City State

Zip Code

Washington

DC

20005

Outstanding Balance Beginning This Period

2770.00

Transaction ID : D739018

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2770.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Beehive Research

Nature of Debt (Purpose):

Research. See Schedule E

Mailing Address 617 Pickford Place NE

City

State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739019

Amount Incurred This Period

1542.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1542.50

1) **SUBTOTALS** This Period This Page (optional)..... ►

4312.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 40 OF 70

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Community Outreach Group LLC

Nature of Debt (Purpose):

Paid canvass - persuasion & GOTV. See
Schedule E

Mailing Address 1110 Vermont Ave N.W. #300

City State

Zip Code

Washington

DC

20005

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739020

Amount Incurred This Period

498343.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

498343.06

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Moxie Media Inc

Nature of Debt (Purpose):

Printing of canvass literature. See Schedule E

Mailing Address 2021 Minor Ave East

City State

Zip Code

Seattle

WA

99102

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739021

Amount Incurred This Period

5500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Strategy Group

Nature of Debt (Purpose):

Printing of canvass literature. See Schedule E

Mailing Address 1606 20th Street NW Floor 3

City

State

Zip Code

Washington

DC

20009

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739022

Amount Incurred This Period

26228.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

26228.50

1) SUBTOTALS This Period This Page (optional)..... ►

530071.56

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 41 OF 70

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SWAY

Nature of Debt (Purpose):

Production and commission of broadcast advertisement. See Schedule E

Mailing Address 4311 Leland Street

City State

Zip Code

Chevy Chase

MD

20815

Outstanding Balance Beginning This Period

0.00

Transaction ID : D739023

Amount Incurred This Period

57839.48

Payment This Period

12504.48

Outstanding Balance at Close of This Period

45335.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

45335.00

2) TOTALS This Period (last page this line number only)..... ►

975582.70

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

975582.70

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 42 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00489799</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>					
Full Name of Payee Planned Parenthood Votes Northwest			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 09 / 02 / 2014		
Mailing Address 2001 East Madison Street			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">3795.00</div>		
City Seattle		State WA	Zip Code 98122		Transaction ID : B511264
Purpose of Expenditure Persuasion phone banks		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> 09 / 22 / 2014	
Name of Federal Candidate Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">227912.84</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee Planned Parenthood Votes Northwest			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> 09 / 02 / 2014		
Mailing Address 2001 East Madison Street			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">3450.00</div>		
City Seattle		State WA	Zip Code 98122		Transaction ID : B511265
Purpose of Expenditure Persuasion canvasses		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> 09 / 22 / 2014	
Name of Federal Candidate Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">227912.84</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">7245.00</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Aletheia Henry</i>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div> 10 / 20 / 2014		[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 43 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00489799</div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee Planned Parenthood Votes Northwest			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 02 / 2014</div>		
Mailing Address 2001 East Madison Street			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4255.00</div>		
City Seattle		State WA	Zip Code 98122		Transaction ID : B511263
Purpose of Expenditure Volunteer recruitment phone banks		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 22 / 2014</div>	
Name of Federal Candidate Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">227912.84</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 12 / 2014</div>		
Mailing Address 1110 Vermont Ave N.W. #300			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">105456.42</div>		
City Washington		State DC	Zip Code 20005		Transaction ID : B528491
Purpose of Expenditure Paid canvass - persuasion & GOTV		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 12 / 2014</div>	
Name of Federal Candidate Mark Begich			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>AK</u>
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">227912.84</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">109711.42</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Aletheia Henry</i>			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 / 20 / 2014</div>		
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 44 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 12 / 2014	
Mailing Address 1110 Vermont Ave N.W. #300		Amount 105456.42	
City Washington	State DC	Zip Code 20005	Transaction ID : B528492
Purpose of Expenditure Paid canvass - persuasion & GOTV		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2014
Name of Federal Candidate Dan Sullivan		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		227912.84	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
Full Name of Payee Moxie Media Inc [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014	
Mailing Address 2021 Minor Ave East		Amount 2750.00	
City Seattle	State WA	Zip Code 99102	Transaction ID : B534701
Purpose of Expenditure Printing of canvass literature. See Schedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014
Name of Federal Candidate Mark Begich		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		227912.84	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		105456.42	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Aletheia Henry</i>		Date MM / DD / YYYY 10 / 20 / 2014 <i>[Electronically Filed]</i>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 45 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY			
Full Name of Payee Moxie Media Inc [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014	
Mailing Address 2021 Minor Ave East		Amount 2750.00	
City Seattle	State WA	Zip Code 99102	Transaction ID : B534702
Purpose of Expenditure Printing of canvass literature. See Schedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014
Name of Federal Candidate Dan Sullivan		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: AK
Calendar Year-To-Date Per Election for Office Sought 227912.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Blueprint Interactive		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 19 / 2014	
Mailing Address 2229 North Pollard St		Amount 5010.00	
City Arlington	State VA	Zip Code 22207	Transaction ID : B499104
Purpose of Expenditure Payment for independent expenditure originally reported on July Monthly Rpt. See Schedule D.		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2014
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 832188.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		5010.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Aletheia Henry</i>		Date MM / DD / YYYY 10 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Screen Strategies Media			Date of Public Distribution/Dissemination 09 / 12 / 2014		
Mailing Address 2940 Stella Blue Lane			Amount 13500.00		
City Fairfax		State VA	Zip Code 22031		Transaction ID : B528494
Purpose of Expenditure TV/cable advertising buy		Category/Type 004		Date of Disbursement or Obligation 09 / 10 / 2014	
Name of Federal Candidate Cory Gardner			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought			832188.44 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee 76 Words			Date of Public Distribution/Dissemination 09 / 12 / 2014		
Mailing Address 1720 Eye Street NW, Ste 550			Amount 9530.56		
City Washington		State DC	Zip Code 20006		Transaction ID : B528496
Purpose of Expenditure Production of broadcast advertisement		Category/Type 004		Date of Disbursement or Obligation 09 / 12 / 2014	
Name of Federal Candidate Cory Gardner			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought			832188.44 Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			23030.56		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 10 / 20 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 47 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Work for Progress		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 23 / 2014	
Mailing Address 1543 Wazee Street, 4th Floor		Amount 12150.00	
City Denver	State CO	Zip Code 80202	Transaction ID : B510743
Purpose of Expenditure Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2014
Name of Federal Candidate Mark Udall		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 832188.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Work for Progress		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 23 / 2014	
Mailing Address 1543 Wazee Street, 4th Floor		Amount 12150.00	
City Denver	State CO	Zip Code 80202	Transaction ID : B510744
Purpose of Expenditure Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2014
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 832188.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		24300.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Aletheia Henry		Date MM / DD / YYYY 10 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 48 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Work for Progress [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2014	
Mailing Address 1543 Wazee Street, 4th Floor		Amount 56022.00	
City Denver	State CO	Zip Code 80202	Transaction ID : B532993
Purpose of Expenditure Distribution of canvass literature. See Schedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014
Name of Federal Candidate Mark Udall		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		832188.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Work for Progress [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2014	
Mailing Address 1543 Wazee Street, 4th Floor		Amount 56022.00	
City Denver	State CO	Zip Code 80202	Transaction ID : B532994
Purpose of Expenditure Distribution of canvass literature. See Sechedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		832188.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Aletheia Henry Signature		[Electronically Filed] Date MM / DD / YYYY 10 / 20 / 2014	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 49 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee The Strategy Group [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2014	
Mailing Address 1606 20th Street NW Floor 3		Amount 13114.25	
City Washington	State DC	Zip Code 20009	Transaction ID : B534095
Purpose of Expenditure Printing of canvass literature. See Schedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 28 / 2014
Name of Federal Candidate Mark Udall		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		832188.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee The Strategy Group [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 28 / 2014	
Mailing Address 1606 20th Street NW Floor 3		Amount 13114.25	
City Washington	State DC	Zip Code 20009	Transaction ID : B534096
Purpose of Expenditure Printing of canvass literature. See Schedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 28 / 2014
Name of Federal Candidate Cory Gardner		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		832188.44	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Aletheia Henry Signature		[Electronically Filed] Date MM / DD / YYYY 10 / 20 / 2014	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Screen Strategies Media		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 29 / 2014
Mailing Address 11150 Fairfax Blvd, Ste 550		Amount 99938.50
City Fairfax	State VA	Zip Code 22030
Purpose of Expenditure Cable TV buy. Correction to amount previously reported on 9/30		Transaction ID : B534099 Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Name of Federal Candidate Mark Udall		Category/Type 004
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		832188.44

Full Name of Payee Screen Strategies Media		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 29 / 2014
Mailing Address 11150 Fairfax Blvd, Ste 550		Amount 299815.50
City Fairfax	State VA	Zip Code 22030
Purpose of Expenditure Cable TV buy. Correction to amount previously reported on 9/30		Transaction ID : B534100 Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Name of Federal Candidate Cory Gardner		Category/Type 004
<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
		832188.44

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	399754.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Aletheia Henry

[Electronically Filed]

Date

MM / DD / YYYY
10 / 20 / 2014

Signature

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div>6100.08</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div></div>
(c) TOTAL Independent Expenditures.....	▶	<div></div>

FEC Schedule E (Form 3X) Rev. 09/2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 53 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014	
Mailing Address 3050 K Street Suite 100		Amount 450053.00	
City Washington	State DC	Zip Code 20007	Transaction ID : B531892
Purpose of Expenditure TV/Cable advertising buy		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014
Name of Federal Candidate Joni Ernst		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		511710.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee SWAY [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014	
Mailing Address 4311 Leland Street		Amount 57839.48	
City Chevy Chase	State MD	Zip Code 20815	Transaction ID : B531894
Purpose of Expenditure Production and commission of broadcast ad. Correction of amnt rptd on 10/10/14. See Schedule D		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014
Name of Federal Candidate Joni Ernst		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		511710.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		450053.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Aletheia Henry		[Electronically Filed]	
Signature		Date 10 / 20 / 2014	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Planned Parenthood Voters of Iowa			Date of Public Distribution/Dissemination 09 / 15 / 2014		
Mailing Address 1171 7th St			Amount 2275.50		
City Des Moines		State IA	Zip Code 50322		Transaction ID : B531896
Purpose of Expenditure Production of broadcast advertisement		Category/Type 004		Date of Disbursement or Obligation 09 / 23 / 2014	
Name of Federal Candidate Joni Ernst			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought 511710.48			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Beehive Research [MEMO ITEM]			Date of Public Distribution/Dissemination 09 / 15 / 2014		
Mailing Address 617 Pickford Place NE			Amount 1542.50		
City Washington		State DC	Zip Code 20002		Transaction ID : B531899
Purpose of Expenditure Research. See Schedule D		Category/Type 004		Date of Disbursement or Obligation 09 / 15 / 2014	
Name of Federal Candidate Joni Ernst			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought 511710.48			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			2275.50		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Aletheia Henry</i>			Date 10 / 20 / 2014 <i>[Electronically Filed]</i>		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 55 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2014	
Mailing Address 1110 Vermont Ave N.W. #300		Amount 5647.75	
City Washington	State DC	Zip Code 20005	Transaction ID : B510998
Purpose of Expenditure Volunteer recruitment phone banks		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		936973.73	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2014	
Mailing Address 1110 Vermont Ave N.W. #300		Amount 22591.00	
City Washington	State DC	Zip Code 20005	Transaction ID : B510999
Purpose of Expenditure Persuasion phone banks		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		936973.73	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		28238.75	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Aletheia Henry		[Electronically Filed]	
Signature		Date MM / DD / YYYY 10 / 20 / 2014	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination 09 / 01 / 2014		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 22591.03		
City Washington		State DC	Zip Code 20005		Transaction ID : B511000
Purpose of Expenditure Persuasion canvasses		Category/Type 004		Date of Disbursement or Obligation 09 / 01 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>		
936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Health Systems Action Fund			Date of Public Distribution/Dissemination 09 / 01 / 2014		
Mailing Address 100 South Boylan Ave.			Amount 1325.00		
City Raleigh		State NC	Zip Code 27603		Transaction ID : B511001
Purpose of Expenditure Volunteer recruitment phone banks		Category/Type 004		Date of Disbursement or Obligation 09 / 01 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>		
936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			23916.03		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 10 / 20 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee Planned Parenthood Health Systems Action Fund			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 01 / 2014		
Mailing Address 100 South Boylan Ave.			Amount 5300.00		
City Raleigh		State NC	Zip Code 27603		Transaction ID : B511002
Purpose of Expenditure Persuasion phone banks		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYYYY 09 / 01 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: NC		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Health Systems Action Fund			Date of Public Distribution/Dissemination MM / DD / YYYYYY 09 / 01 / 2014		
Mailing Address 100 South Boylan Ave.			Amount 5300.00		
City Raleigh		State NC	Zip Code 27603		Transaction ID : B511003
Purpose of Expenditure Persuasion canvasses		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYYYY 09 / 01 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate			District: _____ State: NC		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			10600.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u>			Date MM / DD / YYYYYY 10 / 20 / 2014		

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 58 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY	
Full Name of Payee Planned Parenthood Health Systems Action Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2014	
Mailing Address 100 South Boylan Ave.		Amount 1325.00	
City Raleigh	State NC	Zip Code 27603	Transaction ID : B511005
Purpose of Expenditure Persuasion events		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 01 / 2014	
Mailing Address 1110 Vermont Ave N.W. #300		Amount 5647.75	
City Washington	State DC	Zip Code 20005	Transaction ID : B511006
Purpose of Expenditure Persuasion events		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 01 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		6972.75	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Aletheia Henry		Date MM / DD / YYYY 10 / 20 / 2014	
		[Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY					
Full Name of Payee Analyst Institute LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 27 / 2014		
Mailing Address 815 16th Street, NW			Amount 1665.00		
City Washington		State DC	Zip Code 20006		
Purpose of Expenditure Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.		Category/Type 004		Transaction ID : B510994 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NC		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Rising Tide Interactive			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 27 / 2014		
Mailing Address 901 New York Ave NW #470 East			Amount 4819.25		
City Washington		State DC	Zip Code 20001		
Purpose of Expenditure Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.		Category/Type 004		Transaction ID : B510996 Date of Disbursement or Obligation MM / DD / YYYY 09 / 04 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NC		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			6484.25		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 10 / 20 / 2014		

Full Name of Payee Community Outreach Group LLC [MEMO ITEM]		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 08 / 2014</div> </div>	
Mailing Address 1110 Vermont Ave N.W. #300		Amount <div> <div>249171.53</div> </div>	
City Washington	State DC	Zip Code 20005	Transaction ID : B511928 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>09 / 08 / 2014</div> </div>
Purpose of Expenditure Paid canvass - persuasion & GOTV. See Schedule D		Category/ Type <div> <div>004</div> </div>	
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought <div> <div>936973.73</div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	9638.50
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

Full Name of Payee The Pivot Group		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014	
Mailing Address 1701 I Street NW Suite 550		Amount 13320.41	
City Washington	State DC	Zip Code 20005	Transaction ID : B511930 Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2014
Purpose of Expenditure Printing of canvass lit. Correction of amount previously reported on 9/10/14		Category/ Type 004	
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		936973.73	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	26640.83
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 11 / 2014	
Mailing Address 434 West 33rd Street		Amount 167.12	
City New York	State NY	Zip Code 10001	Transaction ID : B528499
Purpose of Expenditure Value of in-kind list use (email). See line 11a		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2014
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	167.12
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

Full Name of Payee The Feldman Group Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 27 / 2014	
Mailing Address 508-510 8th St. SE		Amount 10333.33	
City Washington	State DC	Zip Code 20003	Transaction ID : B510992
Purpose of Expenditure Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		936973.73	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	10500.45
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 12 / 2014</div> </div>	
Mailing Address 3050 K Street Suite 100		Amount <div> <div>4275.00</div> </div>	
City Washington	State DC	Zip Code 20007	Transaction ID : B528501 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>09 / 10 / 2014</div> </div>
Purpose of Expenditure TV/cable advertising buy		Category/ Type <div> <div>004</div> </div>	
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NC</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>936973.73</div> </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	24941.67
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee 76 Words			Date of Public Distribution/Dissemination 09 / 12 / 2014		
Mailing Address 1720 Eye Street NW, Ste 550			Amount 9530.56		
City Washington		State DC	Zip Code 20006		Transaction ID : B528497
Purpose of Expenditure Production of broadcast advertisement		Category/Type 004		Date of Disbursement or Obligation 09 / 12 / 2014	
Name of Federal Candidate Thom Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]			Date of Public Distribution/Dissemination 09 / 16 / 2014		
Mailing Address 434 West 33rd Street			Amount 1902.78		
City New York		State NY	Zip Code 10001		Transaction ID : B532997
Purpose of Expenditure Social media outreach tool. See Schedule D		Category/Type 004		Date of Disbursement or Obligation 09 / 16 / 2014	
Name of Federal Candidate Thom Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			9530.56		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 10 / 20 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	
Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 16 / 2014	
Mailing Address 434 West 33rd Street		Amount 162.37	
City New York	State NY	Zip Code 10001	Transaction ID : B532998
Purpose of Expenditure List rental. See Schedule D	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2014
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NC	
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Planned Parenthood Action Fund Inc. [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 16 / 2014	
Mailing Address 434 West 33rd Street		Amount 163.38	
City New York	State NY	Zip Code 10001	Transaction ID : B532999
Purpose of Expenditure List rental. See Schedule D	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 09 / 16 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: NC	
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Aletheia Henry</u>		Date <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>10 / 20 / 2014</div> </div>	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Analyst Institute LLC			Date of Public Distribution/Dissemination 08 / 27 / 2014		
Mailing Address 815 16th Street, NW			Amount 3335.00		
City Washington		State DC	Zip Code 20006		Transaction ID : B510995
Purpose of Expenditure Payment for independent expenditure originally reported on Sep Monthly Rpt. See Schedule D.		Category/Type 004		Date of Disbursement or Obligation 09 / 22 / 2014	
Name of Federal Candidate Thom Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination 09 / 24 / 2014		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 13964.79		
City Washington		State DC	Zip Code 20005		Transaction ID : B533000
Purpose of Expenditure Canvassing - Persuasion & GOTV		Category/Type 004		Date of Disbursement or Obligation 09 / 30 / 2014	
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			17299.79		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date 10 / 20 / 2014		

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee Community Outreach Group LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 24 / 2014		
Mailing Address 1110 Vermont Ave N.W. #300			Amount 13964.79		
City State Zip Code Washington DC 20005		Transaction ID : B533001 Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014			
Purpose of Expenditure Canvassing - Persuasion & GOTV		Category/Type 004			
Name of Federal Candidate Thom Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Planned Parenthood Action Fund Inc.			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 14 / 2014		
Mailing Address 434 West 33rd Street			Amount 95.10		
City State Zip Code New York NY 10001		Transaction ID : B510986 Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014			
Purpose of Expenditure Payment for Independent Expenditure originally reported on Sep Monthly Rpt. See Schedule D		Category/Type 004			
Name of Federal Candidate Thom Tillis			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: NC		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			14059.89		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>Aletheia Henry</u> <div style="text-align: right;">[Electronically Filed]</div>			Date MM / DD / YYYY 10 / 20 / 2014		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY			
Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 07 / 2014	
Mailing Address 434 West 33rd Street		Amount 1200.00	
City New York	State NY	Zip Code 10001	Transaction ID : B510987
Purpose of Expenditure Payment for Independent Expenditure originally reported on Sep Monthly Rpt. See Schedule D		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014
Name of Federal Candidate Kay Hagan		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Planned Parenthood Action Fund Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 19 / 2014	
Mailing Address 434 West 33rd Street		Amount 55.17	
City New York	State NY	Zip Code 10001	Transaction ID : B510988
Purpose of Expenditure Payment for Independent Expenditure originally reported on Sep Monthly Rpt. See Schedule D		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014
Name of Federal Candidate Thom Tillis		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 936973.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		1255.17	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Aletheia Henry</u>		Date MM / DD / YYYY 10 / 20 / 2014	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 70 OF 70
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Planned Parenthood Action Fund Inc.			Date of Public Distribution/Dissemination 08 / 23 / 2014		
Mailing Address 434 West 33rd Street			Amount 3740.00		
City New York		State NY	Zip Code 10001		Transaction ID : B510989
Purpose of Expenditure Payment for Independent Expenditure originally reported on Sep Monthly Rpt. See Schedule D			Category/ Type 004		Date of Disbursement or Obligation 09 / 30 / 2014
Name of Federal Candidate Kay Hagan			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 936973.73			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination / / 		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation / /
Purpose of Expenditure			Category/ Type 		
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 3740.00					
(b) SUBTOTAL of Unitemized Independent Expenditures▶ 					
(c) TOTAL Independent Expenditures.....▶ 1326921.74					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Aletheia Henry</i>			Date 10 / 20 / 2014		
			[Electronically Filed]		